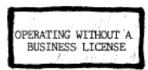
TOWN OF DAVIE 6591 S.W. 45 STREET DAVIE, FLORIDA 33314 (954)797-1112



HOME OCCUPATIONAL LICENSE APPLICATION

INSTRUCTIONS: For each Business Location in the Town of Davie, please complete an application. Once completed, return the application to the Occupational License division located at Town Hall.

APPLICANTS: COMPLETE BOTH SIDES OF APPLICATION			
BUSINESS NAME: Ficture	It!		
BUSINESS STREET ADDRESS:	3875 SW 111 Way		ZIP 33328
BUSINESS MAILING ADDRESS:			
BUSINESS PHONE: (954)	1452-7622	·	
DESCRIBE TYPE OF BUSINESS: Personalized Prot Products			
BUSINESS IS: Corporation Sole ProprietorX Partnership			
Owner/Officer (s)	Home Address	City/Zip	Phone#
1. Memie Beth Day	3875 SW1/1 way	Davic 33328	(954)452-762
2			
Federal ID Number or Social Security Number			
I understand that this is an application for a home occupational license in the Town of Davie and I may not conduct any business at this location until I have received the license itself. I further understand that this license upon issuance, is valid until September 30,, and must be renewed before October 1st.			
This application for home occupational license allows mail and telephone use only, no signs or exterior storage, no on-site employees are permitted.			
Memi Beth Day Print Owner or Officers No		Munic face De	r Officer
Office Use Only: Date 7 Doz Category 4600 Fee Exempt per Sec. 13-13 New Trans License # 02 6986 Control # 14 05 Control # 2 O5 Control # 2 O5 Control # 2 O5 Control # 2 O5 Oate Oat			
Town Council Date	Approved	Denied	
Tabled To Approved	Denied		
OCCUPATIONAL LICENSE DEPARTMENT APPROVAL			

OWNER SIGNATURE REQUIRED ON BACK OF APPLICATION

8/00